

**MINUTES**  
**Alabama Medicaid**  
**Pharmacy and Therapeutics Committee**  
**September 17, 2003**

**Attendees:** Jefferson Underwood (Chair), Rob Colburn, Richard Freeman, W. Thomas Geary, Jr., A. Z. Holloway, Ben Main, Gary Magouirk, Ray Thweatt, Dane Yarbrough, John Searcy, Louise Jones, Tim Covington, guests (72).

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- (1) The meeting was called to order by Dr. Underwood at 1:05 p.m.
- (2) A pharmacy program update was provided by Louise Jones.
  - Possible program reductions due to current and projected budgetary considerations were presented. Some reductions could be effective as early as October 1, 2003. Others could become effective November 1, 2003.
  - Projected preferred drug list implementation dates were presented. For those approved, P&T Committee recommendations of July 2, 2003, soft edits will begin to be phased in on October 1. Hard edits will begin November 1. It was noted that some brand name antidepressants will be on the preferred drug list.
  - Soft edits on most P&T Committee recommendations from the August 6, 2003 P&T Committee will begin December 1, 2003.
  - Implementation of preferred/nonpreferred status for antihypertensives is being delayed as some technical issues exist with some antihypertensive subclasses.
  - Soft edits of approved P&T Committee recommendations of September 17, 2003 will begin at the first of the year.
  - The P&T Committee was advised that when no brand name products are recommended for preferred drug status, Alabama Medicaid invites negotiations with manufacturers of brand name products.
  - It is anticipated that the Alabama Medicaid preferred drug list will be available on ePocrates in the near future.
  - The new prior authorization (PA) form went into effect September 3, 2003.
  - A court reporter recorded proceedings of the September 17 P&T Committee meeting due to a public request.
  - Dr. Geary, Dr. Thweatt and Dane Yarbrough were acknowledged and thanked for their three (3) years of dedicated service to the Alabama Medicaid Pharmacy and Therapeutics Committee. They will be replaced by three new appointees who will participate in the December 10, 2003 meeting.
- (3) Verbal presentations were made on the following drugs by, or on behalf of, the following pharmaceutical manufacturers:

**ANTHYPERLIPIDEMIC AGENTS**

Altacor® (lovastatin) – Andrx  
Niaspan® (niacin) – Kos  
Advicor® (niacin/lovastatin) – Kos  
Zocor® (simvastatin) – Merck  
Zetia® (ezetimibe) – Merck  
Lipitor® (atorvastatin) – Pfizer  
Lescol and Lescol XL® (fluvastatin) – Reliant/Novartis  
Pravachol® (pravastatin) – BMS

**CNS STIMULANTS-ADHD INDICATION**

Ritalin LA® (methylphenidate HCl) – Novartis  
Adderall XR® (amphetamine mixture) – Shire  
Metadate CD® (methylphenidate HCl) – Cell Tech  
Concerta® (methylphenidate HCl) – McNeil

- (4) Pharmacotherapy reviews addressed CNS stimulants indicated to treat ADHD, antihyperlipidemic therapies, SSRI antidepressants revisited – pediatric indications, and sedative-hypnotics revisited – geriatric considerations.

- A. The P&T Committee voted unanimously that no brand name rapid acting/short duration CNS stimulant indicated to treat ADHD be recommended for preferred drug status as they offer no significant or compelling clinical advantage in general use over multisource drugs, strengths and dosage forms available in this therapeutic group.

<u>J. Searcy MD</u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Kathy Hall</u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Mike Lewis/mbf</u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- B. The P&T Committee voted unanimously that no brand name slower onset/long duration CNS stimulant indicated to treat ADHD be recommended for preferred drug status as they offer no significant or compelling clinical advantage in general use over multisource drugs, strengths and dosage forms available in this therapeutic group.

<u>J. Searcy MD</u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Kathy Hall</u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Mike Lewis/mbf</u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- C. The P&T Committee voted that no action be recommended on rapid onset/long duration CNS stimulants indicated to treat ADHD pending further review.

<u>J. Searcy MD</u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Kathy Hall</u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Mike Lewis/mbf</u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- D. The P&T Committee voted unanimously that because of a negative adverse effect profile and substantial risk of hepatotoxicity with regular use of Cylert (pemoline), that Cylert (pemoline) not receive preferred drug status under any circumstances.

<u>J. Sealey MD</u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Kathy Hall</u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Mike Lewis/MLF</u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- E. The P&T Committee voted that no action be recommended on single-entity statins for the management of dyslipidemias pending further review.

<u>J. Sealey MD</u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Kathy Hall</u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Mike Lewis/MLF</u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- F. The P&T Committee voted unanimously that no brand name bile acid sequestrants indicated to treat one or more dyslipidemias be recommended for preferred drug status as they offer no significant or compelling clinical advantage in general use over multisource drugs, strengths and dosage forms available in this therapeutic group.

<u>J. Sealey MD</u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Kathy Hall</u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u>Mike Lewis/MLF</u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- G. The P&T Committee voted that no action be recommended on immediate or extended or controlled-release niacin or niacin combinations for the management of dyslipidemias pending further review.

<u><i>J. Seay MD</i></u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Kathy Hall</i></u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Mike Kinsley</i></u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- H. The P&T Committee voted that no action be recommended on immediate or extended release statin combinations for the management of dyslipidemias pending further review.

<u><i>J. Seay MD</i></u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Kathy Hall</i></u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Mike Kinsley</i></u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- I. The P&T Committee voted that no brand name cholesterol absorption inhibitor indicated to treat one or more dyslipidemias be recommended for preferred drug status as they offer no significant or compelling clinical advantage in general use over multisource antihyperlipidemic agents in other therapeutic groups or recommended preferred brand name (i.e. immediate-release statin) antihyperlipidemic therapy.

<u><i>J. Seay MD</i></u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Kathy Hall</i></u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Mike Kinsley</i></u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- J. The P&T Committee voted that no action be recommended on controlled release statins indicated to treat one or more dyslipidemias pending further review.

<u><i>J. Sealey MD</i></u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Kathy Hall</i></u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Mike Jewsbury</i></u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- K. The P&T Committee voted unanimously that no brand name SSRI antidepressant be recommended for preferred drug status for pediatric use.

<u><i>J. Sealey MD</i></u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Kathy Hall</i></u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Mike Jewsbury</i></u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

- L. The P&T Committee voted unanimously that no brand name sedative-hypnotic agents be recommended for preferred drug status as they offer no significant or compelling clinical advantage in general use over multisource sedative-hypnotic drugs, strengths and dosage forms available.

<u><i>J. Sealey MD</i></u> Medical Director	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Kathy Hall</i></u> Deputy Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification
<u><i>Mike Jewsbury</i></u> Commissioner	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Deny	<input type="checkbox"/> Approve with Modification

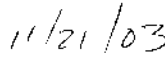
5. The minutes of the July 2, 2003 P&T Committee meeting were approved.
6. The next meeting date was scheduled for December 10, 2003 at 1:00 p.m. The meeting will be held in the State Capitol Auditorium.
7. The meeting was adjourned at 4:10 p.m.

Respectfully Submitted,



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Tim R. Covington, Pharm.D.



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Date

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